

TRAVEL VOUCHER <i>(Read Privacy Act Statement below)</i>		1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE GEPA27OARAA-HQ		2. TYPE OF TRAVEL <input checked="" type="checkbox"/> TEMPORARY DUTY <input type="checkbox"/> PERMANENT CHANGE OF STATION		3. VOUCHER NO. JBSANDIEGOCA022211_V01-0																															
5. a. NAME (Last, first, middle initial) BEALE, JOHN		b. SOCIAL SECURITY NO. EPA-00-002260		6. PERIOD OF TRAVEL a. FROM 02/22/11 b. TO 02/27/11		4. SCHEDULE NO. 																															
c. MAILING ADDRESS (Include ZIP Code) <div style="background-color: black; width: 100px; height: 1.2em; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100px; height: 1.2em; margin-bottom: 5px;"></div>		d. OFFICE TELEPHONE NO. 2 <div style="background-color: black; width: 80px; height: 1.2em; display: inline-block;"></div> 6		7. TRAVEL AUTHORIZATION a. NUMBER(S) 0RA8EC b. DATE(S) 01/11/11		10. CHECK NO. 																															
e. PRESENT DUTY STATION EPA		f. RESIDENCE (City and State) <div style="background-color: black; width: 100px; height: 1.2em; margin-bottom: 5px;"></div>		11. PAID BY 																																	
8. TRAVEL ADVANCE a. Outstanding 0.00 b. Amount to be applied 0.00 c. Amount due Government (Attached <input type="checkbox"/> Check <input type="checkbox"/> Cash) D. Balance outstanding		9. CASH PAYMENT RECEIPT a. DATE RECEIVED b. AMOUNT RECEIVED \$ c. PAYEE'S SIGNATURE																																			
12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH <i>(List by number below and attach passenger coupon; if cash is used show claim on reverse side)</i>		I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) ▶ Traveler's Initials																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">AGENT'S VALUATION OF TICKET (a)</th> <th style="width:10%;">ISSUING CARRIER (Initials) (b)</th> <th style="width:15%;">MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)</th> <th style="width:10%;">DATE ISSUED (d)</th> <th colspan="2" style="width:50%;">POINTS OF TRAVEL</th> </tr> <tr> <th colspan="4"></th> <th style="width:25%;">FROM (e)</th> <th style="width:25%;">TO (f)</th> </tr> </thead> <tbody> <tr> <td>See Attached Ticket 2</td> <td>1,571.00</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>See Attached Ticket 1</td> <td>2,149.40</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="6">ACCOUNTING CLASSIFICATION: 11 Immediate Office-1AT^20112012^B^27A^105A46C^^^AP27^^^ - 5,414.67 NR-0.00</td> </tr> <tr> <td colspan="6">COMMENTS: Co-hosting Greening Transportation at the Borders Workshop and the attending th COMMENTS continued on next page</td> </tr> </tbody> </table>		AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL						FROM (e)	TO (f)	See Attached Ticket 2	1,571.00					See Attached Ticket 1	2,149.40					ACCOUNTING CLASSIFICATION: 11 Immediate Office-1AT^20112012^B^27A^105A46C^^^AP27^^^ - 5,414.67 NR-0.00						COMMENTS: Co-hosting Greening Transportation at the Borders Workshop and the attending th COMMENTS continued on next page					
AGENT'S VALUATION OF TICKET (a)	ISSUING CARRIER (Initials) (b)	MODE CLASS OF SERVICE AND ACCOMMODATIONS (c)	DATE ISSUED (d)	POINTS OF TRAVEL																																	
				FROM (e)	TO (f)																																
See Attached Ticket 2	1,571.00																																				
See Attached Ticket 1	2,149.40																																				
ACCOUNTING CLASSIFICATION: 11 Immediate Office-1AT^20112012^B^27A^105A46C^^^AP27^^^ - 5,414.67 NR-0.00																																					
COMMENTS: Co-hosting Greening Transportation at the Borders Workshop and the attending th COMMENTS continued on next page																																					
13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.						TRAVELER SIGN HERE ▶ DATE AMOUNT CLAIMED ▶ 5414.67																															
NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).																																					
14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)				17. FOR FINANCE OFFICE USE ONLY COMPUTATION a. DIFFERENCES, IF ANY (Explain and show amount)																																	
APPROVING OFFICIAL SIGN HERE ▶ DATE																																					
15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR				b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION Certifier's initials:																																	
16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT				c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol):																																	
AUTHORIZED CERTIFYING OFFICIAL SIGN HERE ▶ DATE				d. NET TO TRAVELER ▶		\$ 5414.67																															
18. ACCOUNTING CLASSIFICATION SEE BLOCK 12 ABOVE																																					

TRAVEL VOUCHER
EPA-00-002260
BEALE, JOHN

TRAVEL AUTHORIZATION NUMBER(S)/DATE(S)
0RA8EC 01/11/11

COMMENTS: (cont'd)

e 21st Century Scenario Modeling Workshop; National Security Environmental Challenge sponsored by DOD, CIA, Cal Tech and SRI.

SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED	INSTRUCTIONS TO TRAVELER <i>(Unlisted items are self explanatory)</i>										Complete this information if this is a continuation sheet. PAGE <u>2</u> OF <u>1</u> PAGES	
	<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.) </div> <div style="width: 30%;"> Complete only for actual expense travel </div> <div style="width: 35%;"> Col. (d) thru (g) Show amount incurred for each meal, including tax and tips, and daily total meal cost. (h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals). (i) Complete for per diem and actual expense travel. (j) Show total subsistence expense incurred for actual expense travel. (m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (i) or maximum rate. (n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc. </div> </div>										TRAVEL AUTHORIZATION NO. 0RA8EC	
											TRAVELER'S LAST NAME BEALE	

DATE 11 20	TIME (Hour and am/pm)	DESCRIPTION (Departure/arrival city, per diem computation, or other explanation of expenses)	ITEMIZED SUBSISTENCE EXPENSES							MILEAGE RATE: 0.000 NO. OF MILES (k)	AMOUNT CLAIMED		
			MEALS				MISCEL- LANEOUS SUBSIS- TENCE (h)	LODGING (i)	TOTAL SUBSISTENCE EXPENSE (j)		MILEAGE (l)	SUBSISTENCE (m)	OTHER (n)
			BREAK- FAST (d)	LUNCH (e)	DINNER (f)	TOTAL (g)							
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)
02/22		D-:RES: ██████████,											
02/22		CP - Air Fare on IBA (GOV								0.00			1571.00
02/22		CP - Air Fare on IBA (GOV								0.00			2149.40
02/22		A-:SAN DIEGO,CA				53.25		131.00	184.25			1841.25	
02/22		RENTAL CAR-NON SELF BOOKED								0.00			211.18
02/22		ATM MACHINE FEE											3.00
02/22		PARKING											144.35
02/22		TRANS-OFFICE / RESIDENCE											60.00
02/22		GAS-RENTAL / GOV'T CAR											54.77
02/22		TRANS-AIRPORT / HOTEL											60.00
02/22		HOTEL TAX (CONUS ONLY)											116.47
02/23		Subsistence				71.00		131.00	202.00			202.00	
02/24		A-:LOS ANGELES,CA				71.00		123.00	194.00			194.00	
02/24		D-:SAN DIEGO,CA											
02/25		Subsistence				71.00		123.00	194.00			194.00	
02/26		Subsistence				71.00		123.00	194.00			194.00	
02/27		D-:LOS ANGELES,CA											
02/27		A:RES: ██████████,											
02/27		Subsistence				53.25			53.25			53.25	
02/27		TAV Fee -T											15.00
If additional space is required, continue on another 1012-A BACK, leaving the front blank.									SUBTOTALS	▶	01.00	10211.50	4393.17
									TOTALS	▶	01.00	10211.50	4393.17

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101.7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil,	requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of you SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.	Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form. <div style="border-top: 1px solid black; padding-top: 10px;"> TOTAL AMOUNT CLAIMED 5,414.67 </div>
--	---	--

ACCOUNTING CLASS CODE			TRIP 1
ATM FEE-2117			3.00
COM. CARR.-I-2113			3,720.40
LODGING 2111-2111			631.00
M&IE 2111-2111			390.50
OTHER-2117			435.59
RENTAL CAR-2115			219.18
TAV EXP -I-2118			15.00
11 Immediate Office			5,414.67
1AT^20112012^B^27A^105A46C^^^AP27^^^			

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES	5,414.67
NON-REIMBURSABLE EXPENSES	0.00
=====	
TOTAL AMOUNT CLAIMED	5,414.67
PREV PAYMENTS	3,843.67
GOV'T ADVANCE OUTSTANDING	0.00
GOV'T ADVANCE APPLIED	0.00

	0.00
=====	
NET TO TRAVELER (GOVT)	1,571.00
GOV'T CHARGE CARD EXPENSES	0.00
GOV'T CHARGE CARD ATM ADV	0.00
ADD'L GOV'T CHARGE CARD PYMT	0.00
=====	
TOTAL GOV'T CHARGE CARD AMT	0.00
PAY TO GOV'T CHARGE CARD	0.00
PAY TO TRAVELER	1,571.00

STATUS	DATE	TIME	SIGNATURE NAME
CREATED	03/16/11	11:27AM E	
VOUCHER PREPARED	03/16/11	12:05PM E	
SIGNED	03/28/11	2:19PM E	JOHN BEALE
AUTHORIZED	03/29/11	5:28PM E	
ADJUSTED	03/30/11	12:02PM E	
APPROVED	03/30/11	12:03PM E	
STAT SAMPLING	03/30/11	12:05PM E	Paul Payment
PAY LINK	03/30/11	12:05PM E	Paul Payment
AUDIT PASS	03/30/11	12:05PM E	Paul Payment
OBLIGATION SUBMITTED	03/30/11	12:09PM E	Paul Payment
POSACK OBLIGATION	03/30/11	12:46PM E	Paul Payment
PAYMENT SUBMITTED	03/30/11	12:50PM E	Paul Payment
PAID	03/30/11	1:16PM E	Paul Payment
CREATED	04/05/11	11:36AM E	
VOUCHER PREPARED	04/05/11	11:41AM E	
SIGNED	04/25/11	3:12PM E	JOHN BEALE
AUTHORIZED	04/28/11	9:47AM E	
APPROVED	04/28/11	4:07PM E	
STAT SAMPLING	04/28/11	4:17PM E	Paul Payment
PAY LINK	04/28/11	4:17PM E	Paul Payment
AUDIT PASS	04/28/11	4:18PM E	Paul Payment
OBLIGATION SUBMITTED	04/28/11	4:28PM E	Paul Payment
POSACK OBLIGATION	04/28/11	5:10PM E	Paul Payment
PAYMENT SUBMITTED	04/28/11	5:15PM E	Paul Payment
PAID	04/28/11	5:40PM E	Paul Payment

I certify that the electronic signatures listed above are
valid and on file.

SIGNED

DATE